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(Depositor's name	Alma Canales
(Signature	
(Date	

1	APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
•	10/802 276	03/17/2004	Gerald D. Fuller	24462.2	. 4222

TITLE OF INVENTION: SUPPLEMENTAL CAPACITIVE DISCHARGE IGNITION SYSTEM

APPLN, TYPE	SMALL ENTITY	ISSUE FEE		PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE			
nonprovisional	YES	\$700		\$300	\$1000	01/18/2006			
EXAM	EXAMINER ART U		IT	CLASS-SUBCLASS					
SOLIS, ERICK R 37		3747		123-599000					
1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. The address indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type) PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment. 2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents or ag									
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a. Applicant claims S	(from status indicated above MALL ENTITY status. See is requested to apply the Iss	e) 37 CFR 1.27.	b. Applie	cant is no longer claiming SMA	LL ENTITY status. See 37 C	CFR 1.27(g)(2).			
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Typed or printed name _	Courtenay B. A	llen		_ Registration	No. 43,469				
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This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

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INCORPORATED

ATTORNEYS + COUNSELORS

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EMAIL ADDRESS cballen@coxsmith.com

January 9, 2006

Mail Stop - ISSUE FEE
Commissioner for Patents
P O Box 1450
Alexandria, Virginia 22313-1450

Re:

U. S. Patent Application Serial No.: 10/802,276

Filed: March 17, 2004

Entitled: SUPPLEMENTAL CAPACITIVE DISCHARGE IGNITION

SYSTEM

Inventor: Gerald D. Fuller Our File No.: 24462.2

Dear Sir:

Enclosed please find the following for filing with the above referenced U.S. Patent Application:

1. Part B Fee(s) Transmittal in duplicate (2 sheets);

2. Check in the amount of \$1,000.00; and

3. Acknowledgement Postcard.

The Commissioner is authorized to charge any deficiency in fees or credit any overpayment to Deposit Account No. 03-3483.

Respectfully submitted,

Court B allen

Courtenay B. Allen Reg. No. 43,469

CBA/lah Enclosures

cc:

Mr. Gerald Fuller (w/encls.)
Ms. Pamela B. Huff (w/o encls.)

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